

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

IN THE INTEREST OF

**Stipulation and Order
to Revise
Dispositional Order**

Name

Date of Birth

Case No. _____

STIPULATION:

The undersigned agree to the following revision(s) to the dispositional order without a court hearing:

(Note: Cannot include change of placement or extension) _____

_____ ☐ See attached

Reason(s) for revision(s):

► _____

Signature of Mother

Print or Type Name

Date

► _____

Signature

Print or Type Name

Date

► _____

Signature

Print or Type Name

Date

► _____

Signature of Father

Print or Type Name

Date

► _____

Signature

Print or Type Name

Date

► _____

Signature

Print or Type Name

Date

THE COURT ORDERS:

The stipulation is approved and the dispositional order is amended as stated.

THIS IS A FINAL ORDER FOR PURPOSES OF APPEAL.

BY THE COURT:

DISTRIBUTION:

1. Original - Court
2. Child/Juvenile/Attorney/Guardian ad Litem
3. Parents/Guardian/Indian Custodian
4. Legal and/or Physical Custodian/Attorney (if any)
5. Social Worker
6. Foster Parent/Treatment Foster Home (if any)
7. District Attorney/Corporation Counsel
8. Tribe (if any)
9. Other _____

Circuit Court Judge

Name Printed or Typed

Date